HOMESICKNESS IN NEW SANTRI: FAMILY ATTACHMENT AND SOCIAL ADJUSTMENT IN ISLAMIC BOARDING SCHOOLS

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Abstract

Homesickness is a common transition problem among new santri, who must separate from their families and adapt to the communal, disciplined life of Islamic boarding schools (Pesantren). This structured narrative review synthesizes 25 sources: 21 primary studies published between 2019 and 2026 and four foundational works on homesickness and adjustment. The synthesis identifies five patterns. Homesickness is a clinically meaningful distress state rather than a trivial complaint; its prevalence varies widely across pesantren settings; social adjustment, perceived social support, peer support, and sense of belonging are consistently associated with lower homesickness; and family attachment has a dual role. Secure parental attachment is associated with psychological well-being and with lower homesickness in some studies, whereas one study found that stronger family attachment positively predicted homesickness. The review proposes a dual relational transition framework in which homesickness is reduced not by weakening family ties but by converting them into a secure base while new belonging is built in the pesantren. The framework is a set of testable propositions, not an empirically validated model. For Islamic Guidance and Counseling (Bimbingan dan Konseling Islam, BKI), the findings support an attachment-sensitive and socially oriented service model that combines early screening, a peer-buddy system, structured family contact, group counseling, and musyrif/musyrifah mentoring during the first months of residence.

Keywords: *Family Attachment, Homesickness, Islamic Boarding School, New Santri, Social Adjustment*

Abstrak

Homesickness merupakan masalah transisi yang umum pada santri baru ketika harus berpisah dari keluarga dan menyesuaikan diri dengan kehidupan komunal serta disiplin pesantren. Kajian literatur naratif terstruktur ini mensintesis 25 sumber, yaitu 21 studi primer tahun 2019–2026 dan empat karya fondasional tentang homesickness dan penyesuaian diri. Sintesis menunjukkan lima pola. Homesickness merupakan distres yang bermakna secara klinis dan bukan keluhan sepele; prevalensinya sangat bervariasi antarpesantren; penyesuaian sosial, dukungan sosial yang dipersepsikan, dukungan teman sebaya, dan sense of belonging secara konsisten berkaitan dengan homesickness yang lebih rendah; sedangkan kelekatan keluarga memiliki peran ganda. Kelekatan orang tua yang aman berkaitan dengan kesejahteraan psikologis dan, pada sebagian studi, dengan homesickness yang lebih rendah, tetapi satu studi menemukan bahwa kelekatan keluarga yang kuat justru memprediksi homesickness yang lebih tinggi. Kajian ini mengusulkan kerangka dual relational transition, yaitu homesickness berkurang bukan dengan melemahkan ikatan keluarga, melainkan dengan mengubahnya menjadi secure base sambil membangun keterikatan baru di pesantren. Kerangka ini merupakan proposisi yang dapat diuji, bukan model yang telah tervalidasi secara empiris. Bagi Bimbingan dan Konseling Islam (BKI), temuan mendukung model layanan yang sensitif terhadap kelekatan dan berorientasi sosial melalui skrining awal, teman sebaya

pendamping, komunikasi keluarga terstruktur, konseling kelompok, serta pendampingan musyrif/musyrifah pada bulan-bulan pertama.

Kata Kunci: *Homesickness, Kelekatan Keluarga, Penyesuaian Sosial, Pesantren, Santri Baru*

INTRODUCTION

Entering a pesantren is a major ecological transition for an adolescent. New santri do not merely move from home to a dormitory. They also move from family-based care to communal life marked by dense schedules, shared rules, hierarchical caregiving, limited contact with parents, and the demand to build relationships with peers from diverse backgrounds. Because the pesantren system requires students to live on campus around the clock, learning, worship, socializing, resting, and conflict resolution all take place in the same setting (Rahmi et al., 2023).

In this transition, longing for home, parents, siblings, family routines, and familiar surroundings can develop into homesickness. Homesickness is commonly defined as a negative emotional state arising from separation from home, characterized by longing and preoccupying thoughts about home, often accompanied by difficulty adjusting to the new environment (Stroebe et al., 2002; Stroebe et al., 2015; Thurber & Walton, 2012). In mild form it may be an adaptive response to separation. When it is intense and persistent, however, it is associated with depression and anxiety. A systematic review and meta-analysis of studies of children under 18 found significant correlations between homesickness and both depression ($r = .43$) and anxiety ($r = .43$) (Demetriou et al., 2022). Homesickness in new santri therefore should not be dismissed as a passing complaint or as a sign of being "spoiled."

Evidence from Indonesian pesantren shows that the extent of the problem varies. In a sample of 191 new students in Agam, West Sumatra, most reported moderate homesickness (68.6%), while 23.0% reported high and 8.4% low levels (Shasra, 2022). In a sample of 385 new santri in North Aceh, by contrast, most were in the low category (53.5%), although 37.6% were in the high category (Rahmi et al., 2023). Among 81 new Grade 10 students at a pesantren in Bandung, 53.1% scored above the sample mean on homesickness (Endi et al., 2026); because that cut-off is sample-relative, it is not a prevalence estimate. These differences probably reflect differences in instruments, cut-off rules, institutional regulations, and sample characteristics, and they warn against generalizing from a single pesantren.

Two clusters of factors stand out in the literature. The first concerns family relationships. Parental attachment is positively related to the psychological well-being of santri (Cahyani et al., 2024), and attachment has been reported to be negatively related to homesickness in new pesantren students (Salmi & Yasmin, 2023). Yet a more recent model found family attachment to be the strongest positive predictor of homesickness (Ramadani et al., 2025). The second cluster concerns success in building a new social life. Social adjustment (Surya et al., 2023), perceived social support (Endi et al., 2026), peer support (Aulia & Ma'rufah, 2025), and sense of belonging (Aqil & Fakhrurrozi, 2025; Lestari, 2021) are all linked to lower homesickness. International studies point in the same direction: interaction with the host-country network predicted lower homesickness among

international students (Billedo et al., 2020), and school connectedness is protective against depression and anxiety in young people (Raniti et al., 2022).

Despite this growing body of work, most studies examine one factor at a time, such as attachment, peer support, belonging, or coping. Endi et al. (2026) likewise observe that homesickness, adjustment, and social support are usually studied separately, and that joint analyses in pesantren settings remain scarce. Few studies integrate the two relational systems that every new santri must navigate: the family as a secure base, and the pesantren community as the place where new belonging is formed. This integration matters for Islamic Guidance and Counseling (BKI), because counseling in a pesantren cannot merely soothe a santri who misses home. It must manage a relational transition by preserving healthy family bonds while facilitating new bonds with peers, musyrif/musyrifah, teachers, and the wider community.

This article therefore aims (1) to analyze the roles of family attachment and social adjustment in homesickness among new santri; (2) to identify how the two interact; and (3) to formulate implications for BKI services during the early phase of pesantren life. Its contribution is a dual relational transition framework, which proposes that homesickness decreases when family closeness is transformed into a sense of security that supports exploration while a sense of belonging in the pesantren develops quickly. The remainder of the article presents the theoretical framework, the review method, the results, a discussion with practical implications, and a conclusion.

THEORETICAL FRAMEWORK

a. Homesickness as a response to separation and transition

Homesickness is distress that arises when a person is separated, actually or in anticipation, from home and from the figures associated with home. It has cognitive features (repetitive thoughts about home), emotional features (sadness, longing, anxiety, loneliness), and behavioral features (withdrawal, seeking contact with family, wanting to go home). The Utrecht Homesickness Scale, used in several of the studies reviewed here, captures five dimensions: missing family, loneliness, missing friends, adjustment difficulties, and ruminations about home (Endi et al., 2026; Stroebe et al., 2002). This multidimensionality matters because it shows that homesickness combines two processes: attachment to the old home and difficulty in the new place.

Homesickness also fluctuates with context. In an ecological momentary assessment of 92 first-year university students, momentary homesickness was highest at the students' current residence, when interacting with parents, and when using video chat, and students felt more unpleasant affect when they felt more homesick (Nauta et al., 2020). A qualitative study of new santriwati found that homesickness intensified at night and when peers were visited by their families (Fauziyah et al., 2026). A study of first-year boys in an Australian boarding school likewise linked homesickness to emotional and mental well-being, resilience, and coping strategies (Mander & Lester, 2023). Homesickness is thus better understood as a situation-dependent state shaped by relationships and self-regulation than as a fixed trait. It can be read as a signal that the shift of the "center of safety" from the home of origin to a sufficiently safe new environment is not yet complete.

A developmental tension sharpens this picture. Early adolescents are pushed toward independence while still needing the emotional security that comes from reliance on parents or other adults (Rahmi et al., 2023). A pesantren that stresses independence without providing warm substitute support risks increasing a santri's sense of isolation. Conversely, responding to every complaint with an immediate return home, or with unstructured contact, may hinder the development of adaptive competence. Effective help therefore needs to balance emotional validation, continuity of family relationships, and facilitation of social engagement within the pesantren.

b. Family attachment: secure base and separation distress

In adolescence, attachment to parents is less a matter of constant physical proximity than of a belief that the relationship is safe, responsive, and dependable. In attachment theory, this belief allows the young person to use parents as a secure base for exploring new environments. Research in pesantren supports the protective side of this idea: parental attachment is positively related to psychological well-being among santri aged 11–18 (Cahyani et al., 2024), and attachment is negatively related to homesickness among new pesantren students (Salmi & Yasmin, 2023).

The relation between attachment and homesickness, however, depends on how attachment functions during separation. Ramadani et al. (2025) examined social adaptation, academic stress, and homesickness, with prior separation experience and family attachment as moderators. Their model explained 65.8% of the variance in homesickness, social adaptation reduced homesickness, and family attachment was the strongest positive predictor ($\beta = .487$), which the authors interpret as stronger family connections paradoxically heightening homesickness. These findings need not be contradictory. Secure attachment may lower distress through trust and emotional security, whereas a strong tie combined with little separation experience and persistent cognitive focus on home may intensify longing. The practical question is not only how close a santri is to the family, but how that closeness works while the santri is away.

c. Social adjustment, peer support, and sense of belonging

Social adjustment is the active process of building a functional fit between the individual and the social environment. In a pesantren it includes understanding unwritten group norms, following the rhythm of communal life, forming friendships, asking for help, sharing space, tolerating differences, and finding a meaningful social position. Adjustment is commonly conceptualized across academic, social, personal-emotional, and institutional-attachment domains (Endi et al., 2026). Related constructs include perceived social support from family, friends, and significant others (Endi et al., 2026), peer support (Aulia & Ma'rufah, 2025), friendship quality and self-compassion (Yasmin & Langerya, 2022), sense of belonging (Aqil & Fakhrurrozi, 2025; Lestari, 2021), and school connectedness (Raniti et al., 2022).

Adjustment and homesickness appear to influence each other over time. Billedo et al. (2020) tested a model in which interactions with the host-country network predict homesickness, which in turn predicts sociocultural adjustment among international students; Facebook interaction with the

host-country network lowered homesickness in both the short and the long term, while homesickness paradoxically increased such interaction in the short term. A longitudinal study of first-year college students followed homesickness and adjustment across the first term and year (English et al., 2017). Social support has also been negatively correlated with homesickness among students living away from home (Istanto & Engry, 2019). Taken together, these studies suggest that the ability to build a new "social home" is as important as maintaining a healthy relationship with the home of origin.

d. The dual relational transition framework in Islamic Guidance and Counseling

This review uses a dual relational transition framework to bring the two relational systems together. The first path is continuity of attachment: keeping family relationships secure without making family contact the only source of emotional regulation. The second path is formation of new belonging: building connection with peers, musyrif/musyrifah, teachers, and the pesantren community. The framework generates three propositions for future testing. Proposition 1: family attachment lowers homesickness when it functions as a secure base that supports exploration, and raises it when it becomes preoccupation with separation. Proposition 2: the formation of new belonging lowers homesickness regardless of attachment style. Proposition 3: homesickness is highest when preoccupied attachment and weak new belonging occur together. These propositions are interpretive syntheses of the literature. They are not hypotheses that any reviewed study has tested in this exact form.

The framework fits BKI principles of accompaniment that do not sever family ties but guide santri toward active patience (sabar), effort (ikhtiar), mutual help (ta'awun), brotherhood and sisterhood (ukhuwah), and the reinterpretation of change as growth. Empirical support for the spiritual component is still limited and mostly qualitative. Endi et al. (2026) discuss religious coping as an internal resource, for example by interpreting distress through the principle that a person is burdened only according to capacity (Qur'an 2:286). Zahrah et al. (2025) found that Islamic counseling in modern-pesantren madrasah in Medan strengthened students' adjustment in social, emotional, and spiritual dimensions, and Fauziyah et al. (2026) identified social support, activities, communication with parents, emotion management, and self-acceptance as coping strategies of new santriwati. BKI can thus serve as a bridge between the family as secure base and the pesantren as secure community.

METHOD

a. Review design

This study is a structured narrative literature review with thematic synthesis. The design was chosen because the aim is not to compute a single pooled effect size but to integrate empirical findings that use heterogeneous constructs and instruments (homesickness, attachment, social adjustment, perceived social support, peer support, sense of belonging, school connectedness, and coping) in pesantren, boarding-school, and other populations living away from home.

b. Search strategy

The literature search was conducted until October 2026 using Google Scholar, the Directory of Open Access Journals, PubMed Central, and the portals of journals and publishers that provide article metadata, DOIs, or full text. Indonesian keywords included "homesickness santri," *"santri baru* homesickness," *"kelekatan orang tua pesantren,"* "attachment homesickness *pesantren," "penyesuaian sosial santri," "dukungan teman sebaya homesickness,"* and *"sense of belonging pesantren."* English keywords included *"homesickness boarding school," "family attachment homesickness," "parental attachment boarding students," "social adjustment homesickness," "school connectedness adolescents," and "peer support homesickness."* The reference lists of the most relevant articles were also screened (snowballing).

c. Eligibility criteria

Sources were included if they (1) were published between 2019 and 2026 as research articles, systematic reviews or meta-analyses, or longitudinal studies, with a small number of earlier foundational works retained to anchor constructs and definitions; (2) addressed at least one core construct, namely homesickness, family or parental attachment, social adjustment, peer or social support, sense of belonging, school connectedness, or coping with separation; (3) concerned adolescents, boarding-school students, santri, first-year university students, or other people moving away from home; (4) reported methods and findings clearly enough to be interpreted; and (5) could be verified through a DOI or a publisher or repository page that was accessible in October 2026. Popular sources without scholarly review, sources unrelated to relational transition, and sources whose bibliographic details or access link could not be verified were excluded.

d. Corpus, data extraction, and analysis

The final corpus contains 25 sources: 21 primary studies and four foundational works (Stroebe et al., 2002; Stroebe et al., 2015; Thurber & Walton, 2012; English et al., 2017). Fourteen of the primary studies were conducted in Indonesian pesantren or Islamic-school settings; the other seven concern boarding-school students, children and adolescents more broadly, or students living away from home (Billedo et al., 2020; Demetriou et al., 2022; Istanto & Engry, 2019; Mander & Lester, 2023; Nauta et al., 2020; Raniti et al., 2022; Zulkarnain et al., 2019). Analysis proceeded in two stages. First, each study was mapped by population, design, relational variables, and direction of association with homesickness or adjustment (Table 1). Second, the findings were coded into five analytic themes: (a) the nature and prevalence of homesickness; (b) family attachment as secure base or separation-focused attachment; (c) social adjustment and belonging as protective factors; (d) the interaction between the two relational systems; and (e) counseling and institutional responses. Inconsistent results were not discarded; they were used to build conceptual explanations. Because the designs are heterogeneous, results are reported as a synthesis of evidence patterns and not as a new statistical meta-analysis.

Quality was appraised informally, by considering design, sample size, instruments, and the fit between sample and context. No formal risk-of-bias tool was applied, which is a limitation noted in Section 5.6.

RESULTS

1. Characteristics of the corpus

Most Indonesian studies are cross-sectional and correlational, often with samples of fewer than 400 santri from one or a few pesantren. International studies include a systematic review, a longitudinal design, and an intensive daily-life design. The key findings are summarized in Table 1.

Table 1. Summary of the main studies in the corpus

No.	Study	Sample / design	Main finding	Meaning for this review
1	Demetriou et al. (2022)	Systematic review and meta-analysis; children under 18 (17 studies reviewed, 5 in the meta-analysis)	Homesickness correlated with depression (r = .43) and anxiety (r = .43).	Homesickness is a well-being concern, not a trivial complaint.
2	Shasra (2022)	191 new students aged 12–14, pesantren in Agam; descriptive	68.6% moderate, 23.0% high, 8.4% low homesickness.	High burden in some settings.
3	Rahmi et al. (2023)	385 new santri, North Aceh; quantitative descriptive	53.5% low and 37.6% high; missing family was the most prominent dimension; santri visited more often had higher homesickness.	Prevalence varies; visit frequency deserves attention.
4	Salmi & Yasmin (2023)	New pesantren students, Agam; correlational	Attachment negatively related to homesickness.	Secure attachment as a protective factor.
5	Cahyani et al. (2024)	313 pesantren students aged 11–18, West Java; cross-sectional	Parental attachment positively correlated with psychological well-being.	Healthy family bonds support well-being.
6	Ramadani et al. (2025)	Pesantren students; five validated instruments; prior separation experience and family attachment as moderators	Social adaptation reduced homesickness; family attachment was the strongest positive predictor (β = .487); model R^2 = 65.8%.	Dual role of attachment.

No.	Study	Sample / design	Main finding	Meaning for this review
7	Surya et al. (2023)	New santri; correlational	Moderate negative relationship between social adjustment and homesickness.	Adjustment as a direct intervention target.
8	Endi et al. (2026)	81 new Grade 10 students, Bandung; multiple regression	Adjustment ($\beta = -.31$) and social support ($\beta = -.61$) jointly explained 66.8% of the variance.	Joint predictors; perceived social support was the stronger.
9	Aulia & Ma'rufah (2025)	85 new santri (junior high); regression	Emotional intelligence and peer support jointly explained 7.5% of the variance; only peer support was significant in the partial test.	Peer support matters, but the effect is modest.
10	Aqil & Fakhrurrozi (2025)	Santri; sense of belonging and parenting	Raising sense of belonging was identified as an important strategy for reducing homesickness.	Belonging as a proximal protective factor.
11	Yasmin & Langerya (2022); Lestari (2021); Zurrahman & Desmita (2026)	New pesantren students; correlational studies of friendship quality and self-compassion, sense of belonging, and peer social support	Each study treats a peer-related or belonging-related variable as a correlate of homesickness (see the original articles for effect sizes).	Converging evidence on peer-related factors.
12	Fauziyah et al. (2026)	5 new santriwati and 2 ustadzah; qualitative	Homesickness intensified at night and when peers were visited; coping included social support, activities, parent communication, emotion management, and self-acceptance.	Practical components for BKI programs.
13	Zahrah et al. (2025)	Three madrasah aliyah in modern pesantren, Medan; qualitative multisite	Islamic counseling strengthened adjustment in social, emotional, and spiritual dimensions.	Counseling as a route to adjustment.

No.	Study	Sample / design	Main finding	Meaning for this review
14	Mander & Lester (2023)	First-year boys, Australian boarding school; exploratory	Homesickness related to emotional and mental well-being, resilience, and coping.	Multidimensional impact of the transition.
15	Billedo et al. (2020)	International students; longitudinal and short-term design	Facebook interaction with the host-country network lowered homesickness; homesickness predicted sociocultural adjustment.	Reciprocal link between homesickness and adjustment.
16	Nauta et al. (2020)	92 first-year students; 14-day ecological momentary assessment	Homesickness was highest at the current residence, with parents, and during video chat.	Contact with attachment figures can trigger yearning.
17	English et al. (2017)	First-year college students; longitudinal	Homesickness and adjustment tracked across the first term and year.	Longitudinal link of homesickness to adjustment.
18	Istanto & Engry (2019)	Students living away from home; correlational	Social support negatively correlated with homesickness.	Social support as a protective factor.
19	Raniti et al. (2022)	Systematic review; school connectedness and youth depression and anxiety	Most studies found a protective relation between higher school connectedness and depressive or anxiety symptoms.	Connectedness supports mental health.
20	Zulkarnain et al. (2019)	First-year boarding-school students	Examined homesickness together with locus of control and social support.	Personal and social resources considered jointly.

Note. Effect sizes and sample details are reported as stated in the source articles. Rows 10, 11, 14, 17, and 20 are described at the level of detail available in the sources' abstracts and titles.

4.2 Theme 1: Homesickness is a meaningful distress that varies across settings

Across the corpus, homesickness is treated as a state linked to emotional distress and difficulty adapting. The meta-analytic evidence connects it to depression and anxiety (Demetriou et al., 2022). The Indonesian descriptive studies, however, disagree about its level. A majority of new students reported moderate homesickness in Agam (Shasra, 2022), whereas a majority of new santri in North Aceh scored low (Rahmi et al., 2023). Such differences are not necessarily contradictions. They may reflect different instruments, categorization rules, ages, and institutional conditions, and they mean that pesantren should assess their own santri instead of assuming a standard prevalence.

Qualitative evidence points to predictable high-risk moments, notably nighttime and the days when peers receive visitors (Fauziyah et al., 2026).

4.3 Theme 2: Family attachment is protective when it provides security, not preoccupation

The evidence on family attachment is mixed in direction but coherent in interpretation. Parental attachment is associated with higher psychological well-being (Cahyani et al., 2024), and attachment is negatively related to homesickness (Salmi & Yasmin, 2023). At the same time, family attachment was the strongest positive predictor of homesickness in the model of Ramadani et al. (2025). Two further observations suggest that how contact with the family occurs also matters. In North Aceh, santri who were visited more often had higher homesickness (Rahmi et al., 2023), and in the momentary assessment study, yearning was highest during interactions with parents and during video chat (Nauta et al., 2020). Neither finding shows that contact causes homesickness; more distressed children may also prompt more visits, and the designs cannot separate the two. They do indicate that frequency of contact alone is a poor indicator of whether the family is working as a secure base.

Institutional rules shape these dynamics. Endi et al. (2026) report that, in the school they studied, a preliminary survey of 45 tenth-grade students found that 91% missed home and that most said the feeling intensified because mobile phone use was prohibited. Communication restrictions are therefore part of the structure within which attachment operates, and policy choices about contact are, in effect, choices about how the secure base is made available.

4.4 Theme 3: Social adjustment and belonging are the most consistent protective factors

Every study that included a social variable pointed in the same direction. Better social adjustment was linked to lower homesickness among new santri (Surya et al., 2023), and in the Bandung sample adjustment and perceived social support together explained two-thirds of the variance in homesickness, with perceived social support the stronger predictor (Endi et al., 2026). Peer support was significantly associated with homesickness in a sample of 85 new santri, although the variance explained was small (7.5%) and emotional intelligence was not significant on its own (Aulia & Ma'rufah, 2025). Sense of belonging (Aqil & Fakhrurrozi, 2025; Lestari, 2021), friendship quality and self-compassion (Yasmin & Langerya, 2022), and peer social support (Zurrahman & Desmita, 2026) add converging evidence, and social support was negatively correlated with homesickness among students living away from home (Istanto & Engry, 2019).

Adjustment does not equal having many friends. The more informative variables concern quality: whether a santri has a few safe friends, a responsive caregiver, and a sense of being accepted. International findings reinforce this reading. Interaction with the host-country network lowered homesickness among international students (Billedo et al., 2020), and school connectedness showed a protective relation with depression and anxiety in a systematic review (Raniti et al., 2022). Social adjustment appears to work in at least four ways: reducing loneliness, supplying practical help, validating that others share the difficulty, and creating new pleasant experiences that compete with

thoughts of home. These are interpretations drawn from the reviewed findings; none of the studies tested these mechanisms directly.

4.5 Theme 4: The interaction of attachment and adjustment (a conceptual model)

No reviewed study tested the joint effect of attachment type and level of social adjustment on homesickness in a single design. Ramadani et al. (2025) came closest by including social adaptation and family attachment in one model, and their results are consistent with a combined account. Building on those findings and on Propositions 1–3, Table 2 sets out four profiles that can guide screening and service planning. Table 2 is a conceptual heuristic, not an empirical result.

Table 2. Four relational profiles and priority counseling responses (conceptual model)

Profile	Expected risk	Priority counseling response
Secure family attachment and high social adjustment	Lowest	Psychoeducation and light monitoring; keep family communication warm and predictable.
Secure family attachment and low social adjustment	Moderate to high	Social activation: peer-buddy, small-group activities, and mentoring by musyrif/musyrifah to convert emotional security into social exploration.
Preoccupied (anxious) attachment and high social adjustment	Moderate	Parent guidance on supportive, non-checking communication; self-soothing and emotion-regulation skills.
Preoccupied (anxious) attachment and low social adjustment	Highest	Intensive, sequenced support: emotional validation, stabilizing family contact, a dedicated companion, gradual social activation, then meaning-making and autonomy.

Note. The profiles extend Propositions 1–3 (Section 2.4) and have not been validated empirically.

4.6 Theme 5: Counseling and institutional responses

Evidence on interventions in pesantren is mostly qualitative. New santriwati reported coping through social support, activities, communication with parents, emotion management, and self-acceptance (Fauziyah et al., 2026). Islamic counseling in modern-pesantren madrasah strengthened adjustment in social, emotional, and spiritual dimensions (Zahrah et al., 2025). On the basis of their regression results, Endi et al. (2026) recommend structured orientation programs, mentoring systems, and supportive teacher–student relationships. No reviewed study evaluated a combined attachment-and-adjustment program experimentally, which leaves the effectiveness of such a program an open empirical question.

5. DISCUSSION

5.1 Homesickness as a relational problem

The synthesis shows that homesickness in new santri should be understood as a relational problem and not only as a matter of personal resilience. Judging a santri as insufficiently

independent, patient, or strong risks overlooking that entering a pesantren interrupts established attachment routines and demands the rapid construction of a new social network. Evidence from pesantren and from international boarding and university settings points the same way: the quality of the link to home and the quality of connection in the new place both appear to matter for well-being. This reading is consistent with the longitudinal and reciprocal relations between homesickness and adjustment reported by Billedo et al. (2020) and English et al. (2017).

5.2 The dual role of family attachment

The most important conceptual finding is the dual role of family attachment. On one side, secure attachment supplies the trust and internal support that adolescents need for exploration, as the links with well-being (Cahyani et al., 2024) and with lower homesickness (Salmi & Yasmin, 2023) suggest. On the other, family attachment predicted higher homesickness in the model of Ramadani et al. (2025), and contact episodes with parents coincided with peaks of yearning (Nauta et al., 2020). A plausible reconciliation is that attachment predicts distress when separation itself becomes the focus of psychological attention and the santri has little experience of being apart. Pesantren programs should therefore not aim to "reduce closeness to parents." They should aim to turn closeness into a source of courage. Parents can be guided to send consistent messages: reassurance that the relationship remains secure, together with encouragement to solve problems and seek help in the pesantren. This reconciliation is a hypothesis; the studies cited do not test it directly.

Care is also needed in interpreting visit and communication policies. The association between more frequent visits and higher homesickness (Rahmi et al., 2023) has led some authors to recommend fewer visits, but the data are descriptive and the direction of influence is unknown. The evidence supports structured and well-prepared contact better than either a total ban or unlimited access. Contact after a conflict, late at night when emotions peak, or with a very anxious parent may increase yearning, whereas short, scheduled, warm contact that validates feelings and affirms effort is more consistent with the secure-base function.

5.3 Social adjustment as the more modifiable protective factor

Social adjustment, peer support, friendship quality, and sense of belonging all indicate the same direction, and they are more directly modifiable by the institution than family attachment. A pesantren controls much of the social structure: room composition, group activities, buddy systems, and access to caregivers. Simple but consistent social engineering is therefore a promising route to prevention, including supportive room assignments, peer buddies, small-group activities, an older-sibling (*kakak asuh*) system, quick access to musyrif/musyrifah, and a safe space to voice difficulties without stigma. The magnitudes reported differ widely (7.5% of variance in Aulia and Ma'rufah, 2025, versus 66.8% in Endi et al., 2026), so program planners should treat any single figure with caution.

5.4 Implications for Islamic Guidance and Counseling

The findings suggest a shift in BKI from a reactive to a preventive-developmental approach. Counseling need not wait until a santri cries continuously, asks to go home, or breaks rules. A brief

screening can be given during orientation and repeated after several weeks, and monitoring at the end of the first week, the end of the first month, and around the third month is a reasonable schedule, although the evidence reviewed does not establish optimal timing. At each point counselors can assess intensity of longing, sleep, appetite, participation, wish to go home, frequency of crying, peer conflict, and the presence of a safe figure in the pesantren. A tiered model follows from Table 2: santri with high homesickness, low social adjustment, no close friend, and strong separation anxiety enter intensive support; santri with moderate homesickness but good social support receive psychoeducation and monitoring. Tiering uses counseling resources efficiently and reduces the risk of stigma. Table 3 summarizes six program components and their evidence base.

Table 3. Components of an attachment-sensitive and socially oriented BKI program

Component	Practical features	Evidence base and status
1. Psychoeducation on homesickness	Present longing as an understandable response, not a failure; state clear indicators of when to seek help.	Meta-analytic link to depression and anxiety (Demetriou et al., 2022); program effect untested.
2. Attachment-sensitive family contact	Guide parents to avoid invitations to come home, excessive worry, and checking; use validation, prayer, appreciation of effort, and problem-solving questions; schedule contact.	Mixed evidence on attachment and contact (Nauta et al., 2020; Ramadani et al., 2025; Rahmi et al., 2023); a hypothesis to test.
3. Gradual social activation	Small activities with repeated, positive interaction instead of only mass events.	Adjustment and support consistently protective (Endi et al., 2026; Surya et al., 2023).
4. Peer-buddy / kakak asuh	One clearly defined peer companion per new santri: greet, help with practical needs, introduce the environment, link to staff; define role limits and referral paths.	Peer support linked to lower homesickness (Aulia & Ma'rufah, 2025; Zurrahman & Desmita, 2026); effect size modest in one study.
5. Musyrif/musyrifah support	Daily presence allows early detection of changes in eating, sleeping, activity, or withdrawal; provide emotional regulation and adaptation support.	Staff and ustadzah roles noted in qualitative work (Fauziyah et al., 2026); formal evaluation lacking.
6. BKI group counseling	Small groups to share transition experiences, practice communication, resolve room conflicts, and learn self-soothing; frame *sabar* and *tawakkul* as active strategies; use worship, dhikr, and reflection alongside concrete psychological and social help.	Islamic counseling strengthened adjustment (Zahrah et al., 2025); religious coping discussed in Endi et al. (2026); no controlled trials.

Note. "Evidence base" refers to the studies in this review; none evaluated the complete program.

Spiritual practice should complement, not replace, psychological and social help. Framing *sabar* as active endurance combined with adaptive strategies, rather than as passive suppression of emotion, fits the coping evidence from Fauziyah et al. (2026) and the religious-coping discussion in Endi et al. (2026). A protocol that is part of the pesantren's welfare system, rather than dependent on the intuition of individual staff, would also include a brief entry assessment, a history of prior time away from parents, identification of roommates and a companion, psychoeducation for parents, monitoring in the first three months, group counseling for at-risk santri, and a referral system for persistent depressive or anxiety symptoms or functional impairment.

5.5 The framework in context

Conceptually, the dual relational transition framework places the family and the pesantren community as two systems that must complement each other. The family provides continuity; the pesantren provides expansion. A successful santri is not one who no longer needs the family, but one who can carry the family's security into new relationships. A supportive pesantren, in turn, does not replace the family but offers a community in which the santri feels safe enough to grow. The framework should be read as a way of organizing existing findings and generating hypotheses, not as an established theory.

5.6 Limitations and directions for future research

Several limitations should be noted. First, most Indonesian studies are correlational and cross-sectional, so causal direction cannot be established; homesickness may also reduce social engagement. Second, instruments for homesickness and attachment differ between studies, and category cut-offs (for example mean-split categories) are not comparable to clinical thresholds. Third, many samples are small (for example, 81 and 85 participants) or come from a single pesantren or a single sex, which limits generalization. Fourth, several international sources involve university students or non-pesantren boarding schools; they were used to support psychological mechanisms and not to assume equivalent contexts. Fifth, the review is narrative: quality appraisal was informal, no formal risk-of-bias tool or flow diagram was used, and sources that could not be verified were excluded, which may have removed some relevant work. Sixth, for several studies this review relied on the details available in abstracts and bibliographic records, and readers should consult the originals before citing effect sizes.

Future research should use longitudinal designs that begin before entry into the pesantren and continue for at least six months, measuring attachment quality, prior separation experience, social adjustment, sense of belonging, and homesickness at several time points. Mediation and moderation models are needed to determine whether social adjustment mediates the effect of attachment on homesickness or buffers santri with high separation anxiety. Controlled evaluations of the program components in Table 3, including parent-guidance and peer-buddy interventions, would show whether the practical implications proposed here work in practice.

6. CONCLUSION

Homesickness among new santri is a relational transition response that appears when separation from home is not yet balanced by internal security and social connection in the pesantren. The reviewed evidence indicates that family attachment and social adjustment do not operate separately. Secure family attachment tends to function as a secure base that helps santri endure and explore, but attachment centered on separation anxiety may sustain longing when new belonging has not formed. Social adjustment, perceived social support, peer support, friendship quality, and sense of belonging, in turn, show consistent protective associations. These findings support the dual relational transition framework: effective services preserve the continuity of family relationships while accelerating the formation of a secure community in the pesantren.

For BKI, the main recommendations are early screening of homesickness, psychoeducation for parents, structured family communication, a peer-buddy or *kakak asuh* system, stronger roles for musyrif/musyrifah, group counseling, and active spiritual-psychological intervention. Because the framework and the program components are inferred from largely correlational and qualitative evidence, they should be treated as hypotheses for evaluation. Multisite longitudinal research is needed to test the causal paths among attachment, social adjustment, and homesickness and to identify the most effective timing of intervention.

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